EXHIBIT CE-16Consent to Jurisdiction Statements

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Knighthead Holdings Ltd.

On Behalf of the Following Insurer

North American Insurance Company	575 D'onofrio Drive Suite 100 Madison, Wisconsin 53719)
Date: December 14, 2022		
Delia McMahon, Esq. General Counsel Knighthead Annuity & Life Assurance Company, 62 Forum Lane, 1st Floor Camana Bay, Grand Cayman KY-1006 Telephone: (345) 746-0311 dmcmahon@knightheadannuity.com	Sanjiv J. Tata, Esq. Partner Mayer Brown LLP 1221 Avenue of the Americas New York, New York 10020 Telephone: (212) 506-2500 stata@mayerbrown.com	William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com
CONSENT TO JURISDICTION Knighthead Holdings Ltd., propose authorized to do business in the state of Wis consent to the jurisdiction of the Commissic acquiring control of North American Insurate SIGNATURE	sconsin, pursuant to the requirement oner of Insurance and the courts of	nts of ch. 617, Stats., does hereby
Knighthead Holdings Ltd. has caused this st Camana Bay and state of December , 2022	catement to be duly signed on its be Grand Cayman on the	chalf in the city of 14th day of
(SEAL)	Knighthead Holdings Ltd. BY (Name)	
	(Title) CFO	vary

cão

The undersigned deposes and says that deponent has duly executed the attached statement dated December 14 , 2022, for and on behalf of Knighthead Holdings Ltd.; that deponent is the
Chief Executive Officer (Title of Officer) of such company, and that deponent is authorized to execute
and file such instrument. Deponent further says that deponent is familiar with such instrument and the contents thereof, and that the facts therein set forth are true to the best of deponent's knowledge and belief.
thereof, and that the lasts therein set form more than to the best of deponding knowledge and belief.
(Signature)
(Type or print name beneath) CARY DOMBOWSKY
Subscribed and sworn to this
14th day of <u>December</u> , <u>2022</u>
Notary Public Office Of
My commission expires 318 JAN 2023
Shena L. Anglin
Notary Public in and for the Cayman Islands

(My Commission expires on 31st Jan 2023)

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Knighthead Capital Management, LLC

On Behalf of the Following Insurer

Suite 100

575 D'onofiio Drive

Madison, Wisconsin 53719

North American Insurance Company

Date: December 13	2022		
Delia McMahon, Esq. General Counsel Knighthead Annuity & Life Assurance Compe 62 Forum Lane, 1st Ple Camana Bay, Grand C Telephone: (345) 746- dmcmahon@knighthe	k ahy, oor Cayman KY-1006 0311	Sanjiv J. Tata, Esq. Partner Mayer Brown LLP 1221 Avenue of the Americas New York, New York 10020 Telephone: (212) 506-2500 stata@mayerbrown.com	William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com
CONSENT TO JURIS	DICTION		
insurer authorized to d hereby consent to the j upon acquiring control	lo business in the star jurisdiction of the Co	t, proposed affiliate of North Amerite of Wisconsin, pursuant to the regommissioner of Insurance and the configurance Company.	uirements of ch. 617, Stats., does
SIGNATURE			
Knighthead Capital M New York	anagement, LLC has	caused this statement to be duly si	gned on its behalf in the city of
December	2022	on me	13th day of
	(SEAL)	Knighthead Capital Manag BY (Name) Laura L. Torrado (Title) General Counsel	gement, LLC
		(Time) Gelielal Comises	
Attest:	Jan		
(Signature of Officer)	V		
(Title) Chief Financial	Officer		

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Mr. Ara David Cohen

On Behalf of the Following Insurer

Oili	chan of the Pollowing Histires	
North American Insurance Company	575 D'onofrio Drive Suite 100 Madison, Wisconsin 5371	9
Date: December 12, 2022		
Delia McMahon, Esq. General Counsel Knighthead Annuity & Life Assurance Company, 62 Forum Lane, 1st Floor Camana Bay, Grand Cayman KY-1006 Telephone: (345) 746-0311 dmcmahon@knightheadannuity.com	Sanjiv J. Tata, Esq. Partner Mayer Brown LLP 1221 Avenue of the Americas New York, New York 10020 Telephone: (212) 506-2500 stata@mayerbrown.com	William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com
CONSENT TO JURISDICTION		
I, Ara David Cohen, proposed affilto do business in the state of Wisconsin, put the jurisdiction of the Commissioner of Inst control of North American Insurance Comp	rsuant to the requirements of ch. 6 arance and the courts of the state o	17, Stats., do hereby consent to
SIGNATURE		
Mr. Ara Cohen has duly signed this statemed New York on the 12th of	ent in the city of New York day of December, 2022	and state of
(SEAL)	Ara David Cohen BY (Name) Ara D. Cohen	

(Title)

Attest
(Signature of Officer)
Laura L. Torrado

The undersigned deposes and says that deponent	has duly executed the attached statement dated
	simself; that deponent is Mr. Ara David Cohen and
that deponent is authorized to execute and file such instru	ment. Deponent further says that deponent is familiar
with such instrument and the contents thereof, and that the	e facts therein set forth are true to the best of
deponent's knowledge and belief.	
(Signature) // /	
(Type or print name beneath) Ara David Cohen	<u>-</u>
Subscribed and sworn to this	
12 day of December, 2022	BRITTANY R MCCORMICK
Do	NOTARY PUBLIC-STATE OF NEW YORK No. 02MC6412046
Notary Public	Qualified in New York County
My commission expires 12/14/2024	My Commission Francisco As
	My Commission Expires 12-14-2024

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Knighthead Insurance Fund I, Ltd.

On Behalf of the Following Insurer

North American Insura	ance Company	575 D'onofrio Drive Suite 100 Madison, Wisconsin 5371	9
Date: December 12, 2	022		
Delia McMahon, Esq. General Counsel Knighthead Annuity & Life Assurance Compa 62 Forum Lane, 1st Flo Camana Bay, Grand C Telephone: (345) 746-dmcmahon@knighthea	ny, or ayman KY-1006 0311	Sanjiv J. Tata, Esq. Partner Mayer Brown LLP 1221 Avenue of the Americas New York, New York 10020 Telephone: (212) 506-2500 stata@mayerbrown.com	William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com
insurer authorized to de hereby consent to the jupon acquiring control SIGNATURE	surance Fund I, Ltd., o business in the state urisdiction of the Cor of North American I	ed this statement to be duly signed	uirements of ch. 617, Stats., does ourts of the state of Wisconsin on its behalf in the city of
December	, 2022	on the	12th day of
	(SEAL)	Knighthead Insurance Fundame I	dl, Ltd
Attest:			
(Signature of Officer)	Laura L. Torrado		

		ed deposes and says that depo	ment has duly executed the attached statement dated
Dece	ember 12	, 2022, for and on behal	f of Knighthead Insurance Fund I, Ltd.; that deponent is
the	Director		such company, and that deponent is authorized to execute
and fil	e such instrumen		deponent is familiar with such instrument and the contents
			the best of deponent's knowledge and belief.
(Signa	ture)	mas	
(Type	or print name be	neath) Thomas Allen Wagner III	
	-		
Subsci	ibed and sworn t	o this	
12	day of Decem	ber . 2022	BRITTANY R MCCORMICK
	~		NOTARY PUBLIC-STATE OF NEW YORK
-	+		No. 02MC8412046
Notary	Public		Qualified in New York County
-	mmission expire	12/14/2024	My Commission Expires 12-14-2024

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Mr. Thomas Allen Wagner III

On Behalf of the Following Insurer

North American Insurance Company

575 D'onofrio Drive

Suite 100

Madison, Wisconsin 53719

Date: December 12, 2022

Delia McMahon, Esq.
General Counsel
Knighthead Annuity &
Life Assurance Company,
62 Forum Lane, 1st Floor
Camana Bay, Grand Cayman KY-1006
Telephone: (345) 746-0311
dmcmahon@knightheadannuity.com

Sanjiv J. Tata, Esq.
Partner
Mayer Brown LLP
1221 Avenue of the Americas
New York, New York 10020
Telephone: (212) 506-2500
stata@mayerbrown.com

William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com

CONSENT TO JURISDICTION

I, Thomas Allen Wagner III, proposed affiliate of North American Insurance Company, an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., do hereby consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin upon acquiring control of North American Insurance Company.

SIGNATURE

New York	on the 12th d	ay of <u>December</u> , 20)22
	(SEAL)	Thomas Allen Wagner III	2
		BY (Name) Thomas Allen Wagner I	<u> </u>
		(Title)	

(Signature of Officer)
Laura L. Torrado

(Title)

Attest:

The undersigned deposes and says that depor	ent has duly executed the attached statement dated
December 12 , 2022, for and on behalf	of himself; that deponent is Thomas Allen Wagner III
and that deponent is authorized to execute and file su	ch instrument. Deponent further says that deponent is
familiar with such instrument and the contents thereo	f, and that the facts therein set forth are true to the best
of deponent's knowledge and belief.	
(Signature) Anna S	
(Type or print name beneath) Thomas Allen Wagner III	
Subscribed and sworn to this	
12 day of December, 2022	BRITTANY R MCCORMICK
Dri-	NOTARY PUBLIC-STATE OF NEW YORK
Notary Public	No. 02MC6412046
My commission expires 12/14/2024	Qualified in New York County
	My Commission Expires 12-14-2024

is the General Counsel (Title of Officer) of such	ighthead Capital Management, LLC; that deponent a company, and that deponent is authorized to
execute and file such instrument. Deponent further says that	deponent is familiar with such instrument and the
contents thereof, and that the facts therein set forth are true	to the best of deponent's knowledge and belief.
(Signature) (Type or print name beneath) Laura L. Torrado Subscribed and sworn to this 13 day of December, 2022	BRITTANY R MCCORMICK NOTARY PUBLIC-STATE OF NEW YORK No. 02MC6412046
Notal Public My commission expires 12/14/2024	Qualified in New York County My Commission Expires 12-14-2024

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Clementine Special Situations KHAL Ltd.

On Behalf of the Following Insurer

North American Insurance Company	575 D'onofrio Drive Suite 100 Madison, Wisconsin 53719	9
Date: E 54BER 16, 2022		
Delia McMahon, Esq. General Counsel Knighthead Annuity & Life Assurance Company, 62 Forum Lane, 1st Floor Camana Bay, Grand Cayman KY-1006 Telephone: (345) 746-0311 dmcmahon@knightheadannuity.com	Sanjiv J. Tata, Esq. Partner Mayer Brown LLP 1221 Avenue of the Americas New York, New York 10020 Telephone: (212) 506-2500 stata@mayerbrown.com	William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com
CONSENT TO JURISDICTION Clementine Special Situations KHA an insurer authorized to do business in the st does hereby consent to the jurisdiction of the Wisconsin upon acquiring control of North A	ate of Wisconsin, pursuant to the accommissioner of Insurance and	requirements of ch. 617, Stats.,
SIGNATURE		
Clementine Special Situations KHAL Ltd. has of NEW YORK and state of DELEMBER, 2022	as caused this statement to be duly NEW YORK on the	y signed on its behalf in the city day of
(SEAL)	Clementine Special Situation BY (Name) M. BREGO (Title)	EY O'HARA

The undersigned deposes and says that deponent has duly executed the attached statement dated DECEMBER 16, 2022, for and on behalf of Clementine Special Situations KHAL Ltd.; that deponent is the DIRECTOR (Title of Officer) of such company, and that deponent is authorized to execute and file such instrument. Deponent further says that deponent is familiar with such
instrument and the contents thereof, and that the facts therein set forth are true to the best of deponent's
knowledge and belief.
(Signature) (Type or print name beneath) M. GREGORY O'HARA
Subscribed and sworn to this
16th day of JECEMBER, 2022
Bebi Lalli
Notary Public
My commission expires 04/24/2025

Filed with the office of the commissioner of insurance, of the state of Wisconsin

BY

Clementine Special Situations LLC

On Behalf of the Following Insurer

North American Insurance Company

575 D'onofrio Drive

Suite 100

Madison, Wisconsin 53719

Date: DECEMBER 16, 2022

Delia McMahon, Esq.
General Counsel
Knighthead Annuity &
Life Assurance Company,
62 Forum Lane, 1st Floor
Camana Bay, Grand Cayman KY-1006
Telephone: (345) 746-0311
dmcmahon@knightheadannuity.com

Sanjiv J. Tata, Esq.
Partner
Mayer Brown LLP
1221 Avenue of the Americas
New York, New York 10020
Telephone: (212) 506-2500
stata@mayerbrown.com

William J. Toman, Esq.
Partner
Quarles & Brady LLP
33 East Main Street, Suite 900
Madison, Wisconsin 53703
Telephone: (608) 283-2434
william.toman@quarles.com

CONSENT TO JURISDICTION

Clementine Special Situations LLC, proposed affiliate of North American Insurance Company, an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., does hereby consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin upon acquiring control of North American Insurance Company.

SIGNATURE

Clementine Special Situa NEW YORK DECEMBER	ations LLC has car and state of, 2022	used this statement to be duly signed on its behalf in the city of wew york on the 16th day of
	(SEAL)	Clementine Special Situations LLC BY (Name) M. GREGORY O'HARA (Title)

Attest:

Signature of Officer)

BEBI F. ALLI, EXECUTIVE ASSISTANT

TO STORY CONTRACTOR TO
The undersigned deposes and says that deponent has duly executed the attached statement dated
DECEMBER 16, 2022, for and on behalf of Clementine Special Situations LLC; that deponent is
the DIRECTOR (Title of Officer) of such company, and that deponent is authorized to execute
and file such instrument. Deponent further says that deponent is familiar with such instrument and the contents
thereof, and that the facts therein set forth are true to the best of deponent's knowledge and belief.
(Signature)
(Type or print name beneath) W. GREGORY O'HARA
Subscribed and sworn to this
Subscribed and sworn to this 16 day of Decem BER, 2022
R 1. 8 011.
Det + alli
Notary Public / / /
Notary Public My commission expires 04/24/2025

Filed with the office of the commissioner of insurance, of the state of Wisconsin

BY

Clementine Special Situations Parent LLC

On Behalf of the Following Insurer

North American Insurance Company

575 D'onofrio Drive

Suite 100

Madison, Wisconsin 53719

Date: DECEMBER 16, 2022

Delia McMahon, Esq.
General Counsel
Knighthead Annuity &
Life Assurance Company,
62 Forum Lane, 1st Floor
Camana Bay, Grand Cayman KY-1006
Telephone: (345) 746-0311
dmcmahon@knightheadannuity.com

Sanjiv J. Tata, Esq.
Partner
Mayer Brown LLP
1221 Avenue of the Americas
New York, New York 10020
Telephone: (212) 506-2500
stata@mayerbrown.com

William J. Toman, Esq.
Partner
Quarles & Brady LLP
33 East Main Street, Suite 900
Madison, Wisconsin 53703
Telephone: (608) 283-2434
william.toman@quarles.com

CONSENT TO JURISDICTION

Clementine Special Situations Parent LLC, proposed affiliate of North American Insurance Company, an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., does hereby consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin upon acquiring control of North American Insurance Company.

SIGNATURE

Clementine Special Situations of NEW YORK DEE SMBER,	Parent LLC has cause and state of	this statement to be duly si	gned on its behalf in the city day of
(SEA	AL) B (1		Parient LLC

Attest:

(Signature of Officer) BETO I F. ALLI

EXECUTIVE ASSISTANT

The undersigned deposes and says that deponent has duly executed the attached statement dated DECEMBER 14, 2022, for and on behalf of Clementine Special Situations Parent LLC; that deponent is the DIRECTOR (Title of Officer) of such company, and that deponent is authorized to execute and file such instrument. Deponent further says that deponent is familiar with such
instrument and the contents thereof, and that the facts therein set forth are true to the best of deponent's
knowledge and belief.
(Signature)
(Type or print name beneath) M. GREGORY O'HARA
Subscribed and sworn to this
16th day of DECEMBER 2022
Bebi Lalli
Notary Public ,
Notary Public My commission expires $04/24/2025$

Filed with the office of the commissioner of insurance, of the state of Wisconsin BY

Clementine Special Situations Holdco LLC

On Behalf of the Following Insurer

North American Insurance Company

575 D'onofrio Drive

Suite 100

Madison, Wisconsin 53719

Date: DEC 16, 2022

Delia McMahon, Esq. General Counsel Knighthead Annuity & Life Assurance Company, 62 Forum Lane, 1st Floor Camana Bay, Grand Cayman KY-1006 Telephone: (345) 746-0311 dmcmahon@knightheadannuity.com

Sanjiv J. Tata, Esq. Partner Mayer Brown LLP 1221 Avenue of the Americas New York, New York 10020 Telephone: (212) 506-2500 stata@mayerbrown.com

William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@guarles.com

CONSENT TO JURISDICTION

Clementine Special Situations Holdco LLC, proposed affiliate of North American Insurance Company, an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., does hereby consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin upon acquiring control of North American Insurance Company.

SIGNATURE

(SEAL)

Clementine Special Situations Holdco LLC

(Name) ^

EXECUTIVE ASSISTANT

The undersigned deposes and says that deponent has duly executed the attached statement dated DECEMBER 16, 2022, for and on behalf of Clementine Special Situations Holdco LLC; that
deponent is the DIRECTOR (Title of Officer) of such company, and that deponent is
authorized to execute and file such instrument. Deponent further says that deponent is familiar with such
instrument and the contents thereof, and that the facts therein set forth are true to the best of deponent's
knowledge and belief.
(Signature)
(Type or print name beneath) M. GREGORY O'HARA
Subscribed and sworn to this 16 day of LECEMBER, 2022
Egel L Rel.
Notary Public
My commission expires $04/24/2025$

Filed with the office of the commissioner of insurance, of the state of Wisconsin

BY

Clementine Investments LLC

On Behalf of the Following Insurer

North American Insurance Company

575 D'onofrio Drive

Suite 100

Madison, Wisconsin 53719

Date: DEC 16, 2022

Delia McMahon, Esq.
General Counsel
Knighthead Annuity &
Life Assurance Company,
62 Forum Lane, 1st Floor
Camana Bay, Grand Cayman KY-1006
Telephone: (345) 746-0311
dmcmahon@knightheadannuity.com

Sanjiv J. Tata, Esq.
Partner
Mayer Brown LLP
1221 Avenue of the Americas
New York, New York 10020
Telephone: (212) 506-2500
stata@mayerbrown.com

William J. Toman, Esq. Partner Quarles & Brady LLP 33 East Main Street, Suite 900 Madison, Wisconsin 53703 Telephone: (608) 283-2434 william.toman@quarles.com

CONSENT TO JURISDICTION

(Signature of Officer) BEBI F. ALLI EXECUTIVE ASSISTANT

Clementine Investments LLC, proposed affiliate of North American Insurance Company, an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., does hereby consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin upon acquiring control of North American Insurance Company.

SIGNATURE

DECEMBER	, 2022	NEW YORK on the 16th day of
	(SEAL)	Clementine Investments LLO BY M. 6REEORY D'HARA (Name) MANAGING MEMBER (Title)

The undersigned deposes and says that deponent has duly executed the attached statement dated
DECEMBER 16, 2022, for and on behalf of Clementine Investments LLC; that deponent is the
MANAGING MEMBER (Title of Officer) of such company, and that deponent is authorized to execute
and file such instrument. Deponent further says that deponent is familiar with such instrument and the contents
thereof, and that the facts therein set forth are true to the best of deponent's knowledge and belief.
(Signature)
(Type or print name beneath) M. GREGORY D'HARA
Subsectibed and sworn to this

Subscribed and sworm to this

/b day of DECEMBER, 2022

The difference of 1/24/2025

Notary Public

My commission expires 04/24/2025

Filed with the office of the commissioner of insurance, of the state of Wisconsin

BY

Mr. Michael Gregory O'Hara

On Behalf of the Following Insurer

North American Insurance Company

575 D'onofrio Drive Suite 100

Madison, Wisconsin 53719

Date: DECY 85 16, 2022

Delia McMahon, Esq.
General Counsel
Knighthead Annuity &
Life Assurance Company,
62 Forum Lane, 1st Floor
Camana Bay, Grand Cayman KY-1006
Telephone: (345) 746-0311
dmcmahon@knightheadannuity.com

Sanjiv J. Tata, Esq.
Partner
Mayer Brown LLP
1221 Avenue of the Americas
New York, New York 10020
Telephone: (212) 506-2500
stata@mayerbrown.com

William J. Toman, Esq.
Partner
Quarles & Brady LLP
33 East Main Street, Suite 900
Madison, Wisconsin 53703
Telephone: (608) 283-2434
william.toman@quarles.com

CONSENT TO JURISDICTION

I, Michael Gregory O'Hara, proposed affiliate of North American Insurance Company, an insurer authorized to do business in the state of Wisconsin, pursuant to the requirements of ch. 617, Stats., do hereby consent to the jurisdiction of the Commissioner of Insurance and the courts of the state of Wisconsin upon acquiring control of North American Insurance Company.

SIGNATURE

Mr. Mich state of	ael Gregor	y O'Hara has d	duly signed this statement in the city of NEW YORK on the 16 day of DECEMBER, 2022	and
		(SEAL)	Michael Gregory O'Hara BY (Name) (Title)	

Attest:

Beli L all:
(Signature of Officer) DEB / F. ALL)

EXECUTIVE ASSISTANT

The undersigned deposes and says that deponent has duly executed the attached statement dated DECEMBER 16, 2022, for and on behalf of himself; that deponent is Mr. Michael Gregory
O'Hara and that deponent is authorized to execute and file such instrument. Deponent further says that
deponent is familiar with such instrument and the contents thereof, and that the facts therein set forth are true
to the best of deponent's knowledge and belief.
(Signature)
(Type or print name beneath) M. GREGORY O'HARA
Subscribed and sworm to this lay of December, 2022

Bredi & alli Notary Public

My commission expires 64/24/2025